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STATEMENT OF

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'SECRETARY OF THE SENATE

PUBLIC RECORDS

FORM 1		ORGANIZATION				12 NOV 14 PH 12: 25 Office Use Only				
NAME OF COMMITTEE (in	ı full)		(Check if name is changed)		mple:If typing, type r the lines.	12F	E4M5			
Ted Cruz fo	or Sena	ite			1.1.1.1.1.1.		1 1 1		11	
	1 1 1 1			1 11			1 1 1			
ADDRESS (number a		815 A I	Brazos PMB 550	111	1111	111.	<u> </u>			
☐ ◀ (Check if a is changed	address			1 1 1	11111	1 1 1 1	<u> </u>	1 1		
is changed)		Austin CITY				STATE	TX 78701 - LIP CODE ▲]
COMMITTEE'S E-MA	AIL ADDRESS	S								
		comp	liance@complia			<u> </u>	1 1	 	<u> </u>	
		Option	al Second E-Mail A	ddress						Ī
				1 1 1		1 1	1 1	1. 1 1		
(Check if a is changed	address d)	www.te	edcruz.org				111.	<u> </u>		
2. DATE 1	1 / 12]′[2012							
3. FEC IDENTIFIC	CATION NUM	/BER	► C	C0049278	35					
4. IS THIS STATEM	MENT	NE	W (N) OR	×	AMENDED (A	A)				
I certify that I have e	examined this	Stater	nent and to the bes	st of my	knowledge and beli	ief it is true,	correct an	d complet	te.	
Type or Print Name	of Treasurer	Cabe	Hobbs ASST	TREASU	REP.			/ *** *********************************	1 / F Ÿ Ŧ Ÿ Ŧ	·····
Signature of Treasure	er <i>Cabell I</i>	Hobbs	JUNIN 1091S	Ass	T TREASURER	Date	11	12	2012	2
NOTE: Submission of			ncomplete information			-		e penalties	of 2 U.S.C.	§437g.
Office Use Only					For further informati Federal Election Com Toll Free 800-424-953 Local 202-694-1100	mission			FORM 1 ed 06/2012)	

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FEC Form 1 (F	Revised 02/2009)
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		((1.01.000 02.2000)					
–	TYPE OF COMMITTEE Candidate Committee:						
(a)	uldate	This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)	Ц	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name Candi		Rafael Edward Ted Cruz					
Cond	lalata	TX State					
Candi Party	Affiliation						
	 1	District					
(c)	Ц	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Candi							
Part	y Con	mittee:					
(d)		(National, State (Democratic, and or subordinate) committee of the Republican, etc.) Party.					
Polit	ical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
		Corporation Corporation w/o Capital Stock Labor Organization					
		Membership Organization Trade Association Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party					
		committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint	Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser					
	1.						
	2.	FEC ID number					
	3.	FEC ID number					
	4.	.					

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FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Na		
Ted Cruz for S	Senate	
	Organization, Affiliated Committee, Joint Fundraising Representative,	, or Leadership PAC Sponsor
Cruz Victory Commit	tee 	
	1609 Shoal Creek Blvd Ste 203	
Mailing Address		<u> </u>
	Austin	78701
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Z Joint Fundraising Representa	ative Leadership PAC Sponsor
. Custodian of Records: lo books and records.	lentify by name, address (phone number optional) and position of the p	person in possession of committee
John Dr		
Full Name Mailing Address	815 A Brazos PMB 550	
maining madross		
	Austin	78701
Title or Position	CITY STATE	ZIP CODE
1111111	Telephone number	512 - 480 - 0006
. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee, assistant treasurer).	; and the name and address of
Full Name Bradley of Treasurer	Scott Knippa	
Mailing Address	815 A Brazos PMB 550	
	Austin	78701 ~
Title or Position Treasurer	CITY STATE Telephone number	ZIP CODE 512 - 236 - 2284

Full Name of Designated	Cabell Hobb	s				
Agent					1 1 1 1 1 1	
Mailing Address		815 A BRAZOS F	PMB 550			
					11111	1111111
		Austin	CITY	1 1 1 1	STATE	78701 ZIP CODE
Title or Position Assistant Treasu		<u>i I I I I I I I I I I I I I I I I I I I</u>		Telephor	ne number <u>l</u>	
Banks or Other safety deposit bo	Depositories	s: List all banks o ains funds.	r other depositorie	s in which the ca	ommittee deposits	funds, holds accounts, rents
Name of Bank, D	Depository, et	5.				
	Plains C	apital Bank	1 1 1 1 1	1 1 1 1 1 1 1 1 1 1		
		919 Congress Av	e			
Mailing Address						
Mailing Address						
Mailing Address		Austin			TX	[78701 [1]
Mailing Address		Austin	CITY		TX	78701 ZIP CODE
Mailing Address Name of Bank, C	Depository, et		CITY			
	Depository, etc BB&T		CITY			
Name of Bank, C			CITY			
		C.	CITY			
Name of Bank, C		1717 King St			STATE	ZIP CODE
Name of Bank, C		C.			STATE	ZIP CODE
Name of Bank, C		1717 King St			STATE	ZIP CODE

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FEC Form 1 (Revised 02/2009)

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1S (Revised (06/2011)		Page 5
Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, etc	ins funds.	nittee deposits funds,	holds accounts, rents
Frost B	ank 		
Mailing Address	PO Box 1600		
	<u> </u>		
	San Antonio	ا لٽا ا	⁷⁸²⁹⁶
	CITY 🗻	STATE △	ZIP CODE 🛕
Name of Any Connected Org	anization, Affiliated Committee, Joint Fundraising Re	presentative, or Lea	[ADDITIONAL]
Legacy Victory Comm	_		
Mailing Address	228 S Washington St		
	Ste 115	<u> </u>	
	Alexandria	ا لنّا لـ	22314
Relationship:	CITY	STATE 🏝	ZIP CODE 📥
Connected Organization	Affiliated Committee X Joint Fundraising Rep	presentative Le	eadership PAC Sponsor
Designated Agent			[ADDITIONAL]
Fuli Name			
Mailing Address			
Title or Position 🖶	CITY 🏝	STATE.	ZIP CODE
		one number	<u> </u>
Joint Fundraiser Participant			[ADDITIONAL]
1,,,,,,,,,,		C ID number C	
	 _ '-		

DANA K, MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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